



Virginia Department of
Behavioral Health &
Developmental Services

Virginia Interagency Refugee Mental Health Initiative

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DBHDS Vision: A life of possibilities for all Virginians

Background

A collaborative effort of the Virginia Department of Social Services – Office of Newcomer Services, the Virginia Department of Behavioral Health and Developmental Services – Office of Cultural and Linguistic Competence, and the Virginia Department of Health – Newcomer Health Program.

Established in 2011

Virginia Interagency Refugee Mental Health Initiative Key Activities

- RHS-15 Screening Implementation and Referral Process
- Regional Mental Health Councils
- Qualified Bilingual Staff Training
- Refugee Mental Health Virtual Toolkit
- QPR Suicide Prevention Trainings
- Mental Health ESL Module
- Trauma informed psycho educational curricula development/Peer Mentor Manual (TIPAG)
- Interpreter funding

The Refugee Health Screener-15 (RHS-15)

The **RHS-15 (Refugee Health Screener-15)** screens refugees for distressing symptoms of **anxiety and depression**, including PTSD. It is not **DIAGNOSTIC**, it is **PREDICTIVE**.

Available translations (bi-lingual/native language versions):

- Arabic, Nepali, Karen, Burmese, Russian, Somali, Tigrinya, Swahili, and Farsi and more.



Local Refugee Mental Health Councils

A sustainable mechanism for community agencies and individuals to dialogue and support mental wellness among refugees in the area.

Intended to strengthen partnerships and referral processes for RHS-15, and access to public and private behavioral health services.

Currently facilitating strategic planning, mission, and visioning with each council.

– *Roanoke, Greater Richmond, Harrisonburg, Fredericksburg*

**Charlottesville, Hampton Roads, Northern Virginia*

Qualified Bilingual Staff Training

As an organization, there are several resources that are available to facilitate communication with non- or limited-English proficient members. The following illustrates the various resources and their relative impact on members' quality of care if used as health care interpreters:



The National Qualified Bilingual Staff Model, effective communication is viewed as a non-linear process. Providers and staff can be effective in utilizing their linguistic skills if encounters are matched appropriately with the level of skills. For example, a Level 1 individual would be considered qualified if functioning within the defined scope of practice in a non-clinical setting.

¹ National Diversity, National Linguistic & Cultural Programs 2000.

Refugee Health and Wellness Virtual Toolkit

- Toolkit to be housed on OCLC webpage
- Intended for BH providers
- Orientation to critical concepts in refugee mental health and wellness
- Easy to access ethnographic information on populations most commonly found in Virginia
- Specific interventions known to be useful in these populations
- Nationally recognized best practices

QPR Suicide Prevention Trainings

DID YOU KNOW?

*The suicide rate for the general U.S. population is 12.4 per 100,000. The suicide rate of Bhutanese refugees resettled in the U.S. is 20.3 per 100,000.**

Suicides have also been reported in other refugee populations, including immigrants from Burma, Somalia, and Burundi.

Refugees may be more likely to experience some of the risk factors that lead to suicide due to the loss experienced in leaving one's own country and the stress and isolation sometimes associated with resettlement.

By the end of the training, participants will be able to:

- Define suicide and describe how it is viewed within refugee communities.
- Identify “risk factors” and clues of suicide.
- Use the QPR Gatekeeper method to help stop someone from attempting suicide.



Health and Wellness ESL Module

Old Dominion University English Language Center

The course will focus primarily on the 10 mental health words and other health care vocabulary development with attention to how they apply this knowledge to listening and speaking.

Training materials:

- detailed 1-hour lesson plan, and
- instructor's copy of the student course pack with handouts;
- explanatory instructors PowerPoint presentation
- bound instructor's graphics package to be used when technology is not available
- 20-minute video that will prepare instructors to teach the 1-hour lesson.

Trauma Informed Psycho-educational Adjustment Group (TIPAG)

The Virginia Refugee Mental Health Initiative use a multi-tiered approach to guide a stratified intervention to support refugee wellness programming.

The first two tiers of intervention focus on services and outreach to general refugee population for cultural adjustment and social integration.

- Tier 1 includes trauma-informed and culture-informed care integrated to existing services (such as RHS screening, Cultural Orientation, VolAg Case Management, ESL/Vocational training, etc.) in order to promote services that are culturally responsive and sensitive to refugee trauma and to build capacity to recognize unique needs of refugees for adequate referrals.
- Tier 2 will focus on healthy acculturation and social adjustment by providing peer-led intervention (i.e., peer-to-peer support group) that aims to increase awareness and skills around stress coping, preventive mental health, substance use, etc.

The Tiers 3 & 4 include intense care and mental health treatment for targeted groups whose RHS-15 score is 12 or above. Tier 3 is designed for trauma-specific care while Tier 4 is for services for refugees with severe mental illness

Two pillars will be adopted as a principle of care and capacity training: Trauma-informed and culture-informed.

Interpreter Funding

Special funding pool that service providers can access when the costs for interpretation prevent immediate, needed case intervention.

- RHS-15 Screening
- Regional Councils
- QPR Refugee Gatekeeper Training – 4x
 - Maybe TOT?
- QBS (may not be free)
- ESL Module Dissemination

